

NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION
Exceptional Children Division

SPECIAL EDUCATION RESOLUTION MEETING

RESOLUTION MEETING FORM

OAH Case # _____ Child's Name _____

Petitioner(s): _____

LEA: _____

Date of Resolution meeting(s): _____ Location: _____

_____ Expedited Due Process Hearing (check **ONLY** if associated with an expedited hearing)

CHECK ONE BELOW:

_____ Parent agrees to attend a resolution meeting _____ with attorney _____ without attorney

_____ Both LEA and parent agree to **waive a resolution meeting Parent's and LEA representative's signatures must be provided below.**

_____ Both LEA and parent agree to **participate in mediation. Parent's and LEA representative's signatures must be provided below.** LEA must complete the form and fax a copy of this document to EC Division at (919-807-3755) to schedule mediation. ****Incomplete form may delay the mediation process****

_____ Parent refuses to participate in resolution meeting. *LEA must document efforts to get parent's participation.*

LEA Representative's Signature: _____ Date: _____

Parent(s) Signature(s): _____ Date: _____

Please fill out the contact information for each party (parent, LEA representative or attorney); this information will be used to set up the mediation meeting

Parent/Guardian's contact information	LEA Representative contact information
Name/Title: _____	Name/Title: _____
Email: _____	Email: _____
Phone Number: _____	Phone Number: _____

<p>The EC Director should fax signed copies of this document as soon as both parties have signed it. Fax to the attention of: NCDPI-EC Due Process Coordinator at (919) 807-3755 and Kim Hausen, Office of Administrative Hearings at (919) 431-3100.</p>
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